Bureau of Nonpoint Pollution Control Division of Water Quality New Jersey Department of Environmental Protection PO Box 029 Trenton, New Jersey 08625-0029

Nonapplicability Form

Fill out this form if you believe that you do not require a NJPDES Discharge to Surface Water (DSW) permit for a "stormwater discharge associated with industrial activity" (as defined in N.J.A.C. 7:14A-1.2), and return this form completed, dated and signed to the Bureau of Nonpoint Pollution Control at the above address.

1. Fac	ility I	nformation: Facility Name			SIC Code		
		Street Address Suite/Building #		Federal ID #			
		City	State	Zip Code	County		
		Contact Person			Tele. Number		
	e faci	ne appropriate box(es) which provide(s) the re lity identified above) a NJPDES permit for a "					
	(i)	All the stormwater from the site is discharged to a combined sewer (one that carries sanitary wastewater and stormwater to municipal treatment plant). If so, the Combined Sewer Certification on the back of this form must be completed and signed, or other supporting documentation submitted.					
Ш	(ii)	All the stormwater on or leaving the site soaks into the ground.					
	(iii)	Our business or agency has an existing NJPDES-DSW permit for all of this facility's discharges of stormwater to surface waters. NJPDES No. NJ					
	(iv)	The building housing all of the regulated industrial activity extends all the way to the property line on all sides. There is no loading dock, and there is no industrial activity occurring on the roof.					
	(V)	All industrial activity has ceased and no "Significant Material" remains exposed to stormwater.					
	(vi)	Other: (Attach printed or typed explanation)					

*** ANY REASON SELECTED MAY BE SUBJECT TO VERIFICATION BY DEPARTMENT SITE INSPECTION***

"I certify under penalty of law that this Nonapplicability Form and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for purposely, knowingly, recklessly, or negligently submitting false information."

WHO MUST SIGN?

FOR A CORPORATION: a "responsible corporate officer" or duly authorized representative. A "responsible corporate officer" is (i) a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation; or (ii) the manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.

FOR A PARTNERSHIP OR SOLE PROPRIETORSHIP: a general partner or the proprietor, respectively, or duly authorized representative.

FOR A MUNICIPALITY, STATE, FEDERAL OR OTHER PUBLIC AGENCY: either a principal executive officer or ranking elected official, or duly authorized representative.

A "responsible corporate officer", general partner, proprietor, principal executive officer of a public agency, or ranking elected official may assign his or her signatory authority for this Nonapplicability Form to a <u>duly authorized representative</u>, which is a named person or generic position (e.g., plant manager, superintendent, plant engineer, operations manager, etc.) having overall responsibility for facility operation or the permittee's environmental matters, by submitting a letter to the Bureau of Nonpoint Pollution Control stating said authority and naming the person or position.

(Print, if applicable	, the name of the corporation	, partnership, or public agency s	submitting this Nonapplicability Form)	
	(Signature)		//	
	Print Name)	*******		
		Discharge to a Combine		
		ver, the following certification merage agency, or municipal en	nust be completed by a representative on a representative of the completed by a representative of the complete by the com	
Facility Name:_				
Address: _				
Block No	Block No Lot No I			
	(Signature)		///(Date)	
	(Print Name)		(Title)	
(Nam	ne of Certifying Agency)			

If a signed Combined Sewer Certification can not be obtained, other supporting documentation may be submitted for Department review in lieu of the above Combined Sewer Certification.